



EFAN

**Bi-Annual
April 1 – September 30, 2016**

Edmonton and area Fetal Alcohol Network Society

Summary

Midway through year 9 of the Alberta FASD Cross Ministry 10-Year Strategic Plan on Fetal Alcohol Spectrum Disorder (FASD), the Edmonton and area Fetal Alcohol Network Society (EFAN) continues to strengthen our community through the diligent and creative work we do at the individual and system levels. From an ecological perspective that values and is based on interrelational connections, our focus remains people, families, communities, and cultures. Holding true to our grassroots heritage, we continue to be a community driven enterprise that is responsive to the needs of our community and the people within it.

In our work towards a future-free of FASD through our mission to educate and support communities, we focus our time and energy on five priority areas. These include, supports and services, information and education, building relationships, advocacy, and research. With a delicate balancing act we ensure that individuals receive support while simultaneously ensuring that the tools to understand and support people with FASD are provided to our large community through education and information. What has become apparent in the first six months of this fiscal year is that as a group of social service agencies (some that receive funds and most that do not) and as part of the larger FASD neighborhood in the province of Alberta our success comes from our ability to work with and alongside one another, offering support, guidance, and that helping hand that means we can work outside of the box, work beyond agency and staff prescribed roles and responsibilities, and work differently with people whose brains work differently. Whether supporting the influx of vulnerable families to the city of Edmonton during the Fort Mc Murray fires or tackling the increase in referrals that have been tracked since the economic difficulties the province and its population has faced, we have been able to maneuver through effectively what comes our way with flexibility and as a team.

Continued support of the Government of Alberta to the FASD Service Network Program has allowed the Network to offer a wide range of supports and services that target children, youth, and adults with or suspected to have FASD, families and caregivers, and communities. The provision of informed and evidence-based practice that not only is advised by but also based within the community reduces the vulnerability of people whose lives are impacted by this disability and increases the protective factors that support interventions and the prevention of FASD.

All activities and initiatives maintained by the Network during the year have aligned with the operational pillars as outlined by the Government of Alberta's 10 Year Strategic Plan on FASD. These include supports and services in the areas of awareness/prevention, assessment/diagnosis, and supports for individuals/caregivers that are family-centered, evidence-based, inclusive, and culturally appropriate.

The Network's action plan to support individuals and families impacted by FASD begins with a multi-disciplinary assessment. The Glenrose assessment clinics, pediatric and adult, have become the foundation from which frontline service provisions are able to build a support framework around each individual and their circle of support. Recognizing that the demand for assessments across the lifespan is enormous, administrators with the Glenrose Rehabilitation Hospital in conjunction with EFAN are examining a lifespan approach to assessment and diagnosis. It is hoped that combining resources and the expertise of each clinic into one over the next couple years will allow this essential service to see more individuals in a timely manner.

With continued funding the Network meets the needs of persons strongly suspected of having or persons with a formal diagnosis of FASD through numerous one-to-one and group mentorship programs. While each differs in its targeted service demographic all work towards reducing not only the impact of adverse conditions on the individual but simultaneously seek to reduce barriers to achieving a quality of life that each person and Albertan deserves. Culturally sensitive mentorship and support groups are offered to youth and adults impacted by an FASD through programs facilitated by the Bissell Centre, Unlimited Potential, Catholic Social Services, Elizabeth Fry Society, Metis Nations of Alberta and Leduc County. Parents and caregivers have continued to receive essential respite services through the Elves and Kids Kottage partnership and can access increased mental health supports at FAS Tracs through CASA, who assists in the development and implementation of home/school/community strategies for children ages 3 – 18.

This reporting period the Network has had the opportunity to fund two new services that meet identified gaps within our community. The first project is the First Nations Mental Health and Addictions program with CASA. In response to the overwhelming evidence of a need to improve mental health support in many Indigenous communities, and at the request from the communities themselves for this provision, CASA has increased the capacity of communities to meet the mental health needs of children and families within their communities by providing local, sensitive, responsive addictions and mental health consultation supports. In recognition that all mental health services developed for and delivered to Aboriginal communities must be culturally appropriate and designed and controlled by the communities, the supports take a holistic view of mental health including the spiritual, mental, emotional, and physical health components. The emphasis is on community connectedness and the role of the family in mental health and healing.

The second program is an enhancement to the staffing compliment at Hope Terrace, a first of its kind in Alberta, FASD supportive housing project in Edmonton. Hope Terrace is a 15 unit apartment building contracted to Bissell Centre by Homeward Trust that supports adults with FASD and who have experienced challenges in maintaining housing, through a housing and harm reduction model. In order to support home stability, life skills, and personal goal achievement through a client-centered approach, Hope Terrace in collaboration with the Network is able to offer program operations in life skills, mental health and addictions, outreach, and cultural connections.

In conjunction with the services provided to individuals and families whose lives are impacted by FASD, EFAN has continued to prioritize prevention efforts and supports this year. Following Dr. Nancy Poole's 4-level Model of Prevention EFAN has increased community awareness of the risks of drinking while pregnant and engaged in targeted prevention conversations with medical/health/social service providers via the FASD Prevention Conversation Project (not fully reported in this bi-annual). Additionally, the First Steps program, using the Parent Child Assistance Program model, has worked diligently to reduce the harms to babies prenatally exposed to alcohol, reduce future births of children impacted by an FASD, and have supported mothers and mothers to be to effectively parent their children and make healthy lifestyle choices and changes.

Some of our highlights include:

- Relationships nurtured and voices shared at 6 Funded Supports meetings and 6 Network meetings.
- 18 Network presentations were held.
- 1080 FASD resource and service inquiries made via email and telephone.
- Collaborated with 14 programs to support individuals with FASD.
- 23 women received prevention supports, 64 individuals assessment and diagnostic services, and 298 people received supports for individuals and caregivers.
- 2 community initiatives were hosted, raising awareness to FASD.
- 21,530 visitors to the website, Facebook reach of 47,388 users, and Tweet impressions to 59,277 people
- 3 FASD Frontline newsletters developed and distributed.



Figure 1: Five goal areas of the Network

The following chart summarizes our efforts, activities, and successes at achieving our strategic goals and the outcomes delivered:

Goal	Efforts, Activities, Successes	Outcomes
<p>Supports and Services</p> <p>To provide individuals, families and communities with a range of holistic supports and services that meet their needs across the lifespan.</p>	<ul style="list-style-type: none"> - The Network continued to fund and collaborate with 14 programs providing support to individuals with an FASD and parents/caregivers. - Services included diagnostic and assessment clinics for children and adults, mentorship supports for youth, adults, and women at-risk of having a child impacted by FASD, respite supports, behavioral and sensory support for children and youth, supportive housing supports, Indigenous mental health and addictions services, and numerous support groups targeting different at-risk populations. - Referral and information support was offered through the Network Coordinator, 1,080 inquiries via email or telephone were received this period. - Informal/formal consultations were held with individuals, families, and agencies to determine (and update) the needs and gaps in the community, which is used to inform practice and future directions. - Supports and services bi-annual compliance reviews were completed. 	<ul style="list-style-type: none"> - Individuals, families and communities affected by FASD have coordinated access to supports and services that meet their needs. These include access to supports for individuals and caregivers, assessment and diagnosis services and prevention supports. - Individuals, families and communities have knowledge of and access community resources. - Individuals, families and communities have knowledge about FASD. - Individuals, families and communities experience an increase in well-being. - Individuals and families experience a decrease level of stress and in increased ability to cope. - Interdisciplinary teams collaborate in informed approaches. - Clients are satisfied with their program involvement.
<p>Information and Education</p> <p>To provide access to information and resources while developing and delivering evidence-based education and training opportunities to the community.</p>	<ul style="list-style-type: none"> - 2 community initiatives were hosted by the Network to raise awareness to FASD; these included FASD Day and the Network AGM. - The Network Coordinator had 18 formal presentations in the community with a focus on the Network and FASD information (these do not include Prevention Conversation presentations or presentations made by the FASD Educators at Bissell Centre). - Resources were developed that 	<ul style="list-style-type: none"> - The community has an increased knowledge about the effects of alcohol use in pregnancy. - The community has an increased understanding of FASD that includes caring for and supporting individuals with FASD. - There is a change in attitude/stigma attached to FASD. - A full range of resources

	<p>were cross-purposed on different media platforms; these included 3 FASD Frontline Newsletters (April, May, & Aug/Sept editions), and 3 FASD Tip Sheets (Tips for Siblings, Ownership & FASD, 24-Hour Supervision Strategies).</p> <ul style="list-style-type: none"> - 209 posts made to the Network website and viewed by 21,530 visitors. - The Network Facebook page posted 503 posts, had 655 likes during this period for a total reach of 47,388. - The Network Twitter account tweeted 786 tweets, had 2,395 profile visits with tweet impressions reaching over 59,277 Twitter users. 	<p>(electronic and print) is available.</p> <ul style="list-style-type: none"> - Service providers and programs integrate knowledge of FASD into their practices. - Service providers have the abilities to provide effective and holistic supports to individuals, families and communities impacted by FASD. - Government and service providers have an increased capacity to identify individuals with FASD, understand the unique needs and deliver and/or refer to appropriate services.
<p>Building Relationships</p> <p>To nurture and maintain connections and partnerships with communities, agencies and all levels of government.</p>	<ul style="list-style-type: none"> - The Network nurtured new and old relationships, strengthening associations with community stakeholders through 6 'Funded Supports and Services' meetings and 6 Society meetings during this reporting period. - Network members and Network Coordinator continue to have an active membership (attending monthly meetings) on the Supports, Services, Education and Training Council, PCAP Council, Prevention Conversation Working Group, Prevention Conversation Evaluation Group, and FASD Conference Planning Committee. - The Network with Bissell Centre taking the lead, hosted 5 FASD Frontline meetings in the community. These meetings aim to increase FASD knowledge of frontline staffs while building connections with community stakeholders. 	<ul style="list-style-type: none"> - New relationships and partnerships are expanded. - Existing relationships and partnerships are strengthened. - Mechanisms are in place to facilitate and encourage stakeholder and community engagement. - Effective lines of communication with stakeholders and policy makers are in place. - The profile of the Network at local, provincial, national and international levels is strong. - An increased number of initiatives, programs and service agencies are working to prevent FASD and support individuals and families impacted by FASD
<p>Advocacy</p> <p>To help create a voice for and with people impacted by an FASD.</p>	<ul style="list-style-type: none"> - The Network continues to be represented at monthly AB FASD Service Network meetings. - Acting as a central referral point person, the Network Coordinator notes and tracks all communications with and between 	<ul style="list-style-type: none"> - FASD is recognized as a public health matter that impacts all public sectors and broad policy. - FASD is recognized as a community issue that requires a community

	<p>members of the community, their concerns, and identified gaps within the community, taking this information to the Network.</p> <ul style="list-style-type: none"> - Of the 1080 telephone and email communications with stakeholders, 53% were from parents/caregivers and 35% were from individuals with or suspected to have FASD. 	<p>response.</p> <ul style="list-style-type: none"> - FASD is recognized as a disability that requires specific supports and services that are best practice and evidence based.
<p>Research</p> <p>To inform, participate and disseminate research and contribute to the development of best-practice interventions.</p>	<ul style="list-style-type: none"> - The Network Coordinator is a member of the Prevention Conversation Evaluation Working Group, a group tasked with providing feedback on program logic model, outcomes, indicators, evaluation tools and protocols. - The Network has collected and disseminated through its social media sites all relevant national and international published research related to FASD. - 'Research' has been added as a standing agenda item to the monthly Network meetings, which allows the opportunity for members to be informed of new research and discuss ways the research, can be incorporated into current practices. - The Network encourages researchers to present at monthly Network meetings. 	<ul style="list-style-type: none"> - The Society activities are evaluated. - Research findings, including those from monitoring and evaluation systems, are used to inform Society strategic planning, services and programs. - Stakeholders and the community have knowledge of and access to research and leading practice.

Community Successes

This past September 9th, 2016 International FASD Day, the Network approached the recognition and celebration of this special occurrence from a different perspective. Normally the Network members would plan a morning activity within the community that served to inform, provide food, and allow networking between attendees.

Within the assumption that while those who sit around the table understand what it means to take an 'FASD specific lens' to the work that we do, we recognized that our colleagues and agencies do not necessarily share our approach.

Network members and stakeholders were challenged to inform and educate their own employers in FASD awareness and prevention, in creative events and initiatives big and small during the week of September 5 – 9, 2016.

Nine agencies took up the challenge and their activities reached hundreds of persons, not only fellow colleagues but members of the general public. With FASD information and the Prevention Conversation core messages, agencies and staff held events such as bbqs, 'Who Wants to Be An FASD Millionaire' game show, community showcase events, housing grand opening with Mayor Don Iveson in attendance, and other fun and fantastic events.



Community engagement activities are used in an ongoing process to build and strengthen relationships that contributes to the overall aim of 'building community' around FASD.

While framed as a competition, our September 9th, 2016 events helped to support progressive partnerships and sustainability by promoting informing, consulting, involving, collaborating, and empowering the community.

September 9th was also the grand opening of Hope Terrace, the FASD supportive housing complex located in Edmonton. With the suites fully housed and staff and programming in place, the program was able to celebrate with various level government stakeholders and members of the community this unique project. The media coverage of this event has allowed FASD to remain top of mind to citizens in Edmonton, Alberta, and across the nation, specifically highlighting the need for safe, secure, housing for persons with FASD.

CBC Edmonton showcased the opening in the following news story:

Edmonton supportive housing complex for fetal alcohol spectrum disorder a Canadian first

'This is what I call home, I've never had anywhere I could call home before now'

By Mack Lamoureux, [CBC News](#)



"This is home."

"This is what I call home," reiterates Casandra. "I've never had anywhere I could call home before now." Casandra, sitting comfortably in her central Edmonton apartment, explains she was born with fetal alcohol spectrum disorder (FASD).

From a young age, she floated through the foster care system in Ontario before coming to Alberta. Not knowing what was going to happen to her she ran away frequently — the streets became familiar to her.

After coming of age, the system moved Casandra into a house.

"It didn't go well. I was evicted and was homeless for like two years," she said. "Being homeless was the worst experience of my life – being hungry, not able to sleep, and always scared."

Now though, Casandra is home. Through the help of her social worker, Casandra is one of the first residents of Hope Terrace, a supportive housing apartment complex that offers 24-hour support for people born with FASD.

FASD is a lifelong disability that causes birth defects, developmental delays, learning disabilities, memory problems, difficulty communicating feelings and understanding consequences. It is caused when a mother drinks while pregnant.

Hope Terrace had its grand opening Friday, which is also Fetal Alcohol Spectrum Disorder Awareness Day. The building is the first of its kind in the nation. "When the opportunity to apply to provide supportive housing here at Hope Terrace arose, we knew it was our chance to provide this unique service for people who are struggling with an FASD," said Gary St. Amand, the CEO of Bissell Centre.

"It is the first of its kind in Canada. In that way it really creates an opportunity to provide housing for the folks that are here, but at the same time to work together and create a model." St. Amand hopes that over time Hope Terrace will be replicated in Edmonton and beyond. The building was purchased and will be operated by Homeward Trust. Susan McGee, Homeward Trust Edmonton's CEO, said that the building couldn't have become a reality without funding help from the city.

"There is a critical need for permanent supportive housing in our city that provides the appropriate supports in a harm reduction environment," said McGee. "Thanks to projects like Hope Terrace and partners like Bissell Centre, we will achieve the goal of ending homelessness in Edmonton."

FASD has profound economic and social impacts on those who live with it and it doesn't seem to be going away. Around 50,000 Albertans have the disorder and nine in 1,000 babies born will also have it. This year, over 500 babies will be born with FASD. The Alberta government estimates that the disorder annually costs the province \$927.5 million.

"This is something that is preventable. That's why education is so critical," said St. Amand.

For Casandra, the most important part of being in Hope Terrace is being around people who know what she is going through. With help she has been able to find some stability in life and the young woman who was homeless a few short years ago now hopes to go back to school. "This place has helped a lot because I can go out in the community and not feel like a freak, or I can talk to somebody at a store and not get mad at them," she said. "I can just go downstairs and talk to somebody that will sit there and listen to me."

Retrieved from: <http://www.cbc.ca/news/canada/edmonton/edmonton-supportive-housing-complex-for-fetal-alcohol-spectrum-disorder-a-canadian-first-1.3756353>

On September 6, 2016 the Network held its 3rd annual general meeting. With the business quickly finished, the event prioritized building relationships among members. Teamwork has been essential to the work of the Network in the non-profit sector. Teamwork helps to foster support, learning, belonging, and commitment to the work that we do and helps to ensure people share the same purpose and goals as we continue to move forward. Our AGM was also an opportunity to give back to another agency that supports children in the aftermath of reporting abuse, Zebra: Child Protection Centre. With fun and playful competitions our group put together stuffed animals that were collected by the Zebra Centre and given to the children accessing their supports.



Constraints Encountered Achieving Strategies

Supports/Services Constraints

All the supports and services funded through the Network are operating to full capacity (fully staffed with full caseloads). As the waitlist numbers are ever increasing, it has become evident that current programs cannot meet the demand for services from the community within the existing model of service provision. It is time to examine what ‘different’ can look like for our Network and the service supports we provide.

Program Constraints

Housing continues to be an issue in all of our FASD mentorship programs, whether for youth-at-risk or adults with an FASD. There is a lack of affordable housing, a lack of supportive housing, and a lack of funding to assist with housing. Over the years agencies have learned that housing is one of the most essential needs to be taken care of in order to have clients move towards meeting their goals. It is difficult to work on issues when you don’t know where you are going to be sleeping at night or where you are going to obtain a meal.

Network Constraints

To ensure that the community is aware of and accesses supports and services available through the Network and Network member agencies, EFAN has sustained and enhanced its online presence and community visibility. This has been accomplished through a social media plan, community engagement, and with the FASD Prevention Conversation Project. This increased visibility has resulted in an increase in referrals to the FASD programs that are already at capacity in workloads.

Solutions Found

Addressing the current waitlist lengths will require ongoing adjustments by the FASD programs. Many supervisors and managers have allowed frontline staffs to work outside of current program guidelines to ensure that individuals seeking supports do not fall through the cracks because of a waitlist that is a year to two long. For example, staffs have provided repeated telephone support to adults with an FASD who are not currently on a caseload, the FASD Educator position (not Network funded) has provided formal case consultations to families, and the Network Coordinator gives additional support to staff, parents, caregivers, and individuals with an FASD through in-person meetings, information sessions, and case consultations.

Long waitlists are also addressed through the groups that are provided by agencies and programs with the support of the Network. Groups are now open to all individuals who meet the targeted population of the group regardless

of the individual's involvement with a specified program. Of note, the McDaniel Youth Groups, Coaching Families Parent Group, and FASD Respite Parent Group have been successful in reaching out and helping individuals to feel a sense of belonging. What has been learned through offering groups is that 'if you build it they will come' is not accurate. Child-minding, evening groups, meals provided, transportation, and a focus on relationships, safety, and security has and continues to bring large numbers of participants to the group sessions. Currently the FASD Educators with Bissell Centre are in consultation with the Network and its members to determine demand, need, and a model of group work delivery to utilize with the adult population, while incorporating learnings from the previous adult support groups offered to the community.

To address the capacity of the Glenrose to provide assessment and diagnostic supports to children and adults suspected of having FASD and the increasing time it takes to maneuver through the process, the Network and hospital administrators are currently discussing creating a lifespan approach to the clinic. The expertise of the clinic staff combined with the current emphasis of the Glenrose to utilize a 'lifespan' lens to other clinics, and the needs of the community, will be integrated to form a unique model of service that should be implemented by 2018.

Need For Adjustment

No adjustments to project activities and plans have occurred during this reporting period, yet, the Network is examining a unique model of service delivery that would incorporate 3 arms of service provision. Taking into consideration that FASD is a spectrum that requires a spectrum of service delivery and that current operations cannot meet the needs of the community in a timely manner, the Network hopes to change its program operations to embed within existing programs Program Resource Workers.

The purpose of the Resource Worker positions would be to provide timely in-person meetings, referrals, education, and other short-term solutions to individuals and families who are seeking supports. Working extensively with other community agencies to identify existing and potential sources of support for families and individuals, the resource workers will provide soft-touch interventions while the individuals seek longer-term case management planning.

With the combination of group work currently offered by Network members, long-term mentorship supports, and short-term resource management, the Network will be able to more effectively support those in the community by ensuring everyone is connected.

Opportunities Identified

In order to support continuous improvement and programming responsive to new and relevant research the Network has identified the need to promote not only knowledge dissemination but also knowledge into practice and policy (for funded programs, Network members, and the Network as a whole). The Network continues to create and supporting four areas of focus that will become pillars of practice when serving children and families. These include:

- **Brain development and the influence of epigenetics:** Understand the typical pre/postnatal brain development, the impact of maltreatment on development, and impact on interventions and strategies of caring and support.
- **Trauma informed:** Understand the impact of trauma on behavior, experiences, and development and the impact on interventions and strategies of caring and support.
- **Grief and loss:** Understand the impact of grief and loss on past and current experiences and relationships and the impact on interventions and strategies of caring and support.
- **Gender based analysis plus:** Understand the potential impacts of policies and programs on diverse groups of women, men, girls, and boys, taking into account gender and other identifying factors such as age, education, language, geography, culture and income.

Stand-alone learning sessions in each area will be offered to programs and staff, and monthly Network meetings to discuss how to incorporate the knowledge into practice and policy. Currently Network funded programs have begun answering the following questions related to GBA+ in their quarterly reporting:

1. Has your organization gathered or generated disaggregated data or undertaken research related to gender?
2. What are specific examples of the application of GBA+ to your initiative/program? Has GBA+ resulted in changes to policy, programs, or communications?
3. What measures have been taken to ensure the sustainability of GBA+ in your organization?

Network Successes

Each funded program has provided for this report a description of their successes. These narratives highlight the diversity of services, the continuum of care that is available to the community, and the collaborations and teamwork that must happen in order to get the job done!

Elizabeth Fry Society: Girls Empowered and Strong Program

The Girls Empowered and Strong is a program for teenage girls who want to address the many issues facing them and become empowered to make strong and positive choices for their futures. Our GES program is flexible, both in its content and its location. Our goal is to develop a rapport with the girls in an environment that is comfortable to them.

An enormous success this reporting period was our 'empowerment' themed summer programming offered to young women with or suspected to have FASD. In particular we provided a weeklong program with 5 participants that focused on community leadership, civic engagement, and skill development. Activities such as touring the legislature, volunteering at the Reuse Center, and a final project where the girls were tasked with planning a fundraising project, provided the participants with opportunities to develop personal leadership qualities through teamwork, community action, and helping others.

Catholic Social Services: McDaniel Youth Program

In order to recognize how best to support and help youth with FASD it is essential that each mentor appreciate that each individual is unique, complex, and multifaceted. The professional relationship that they create with each program participant is an integral part of intervention success. At times it can be difficult if the youth is not able or willing to form a relationship with the staff that has been assigned to them. While it may take months to form a bond, once the connection is made the exciting work can begin!

Silas was sporadically involved with the McDaniel Youth Program for two years before he really clicked with his mentor. Taking the time to identify his needs and interests, Silas's mentor encouraged him to apply himself in areas that appealed him. Always interested in art he began attending a weekly group that supported his expressive side and would connect with his mentor on the same days in order to share the experience. Silas's relationship grew with his mentor the more he was involved with art. Silas was able to express himself and his feelings through his art and share with his mentor the stories that influenced them.

The weekly art class also benefited Silas in promoting the growth of other life skills. Silas learned how to be consistent and manage time to the best of his ability, arriving on time for sessions and learning the public transportation routes to class. As Silas's confidence grew so did his ability to connect with the McDaniel groups and utilize his public transportation skills for his other endeavors. Silas now arrives to group by using public transportation and is using this skill to apply for jobs in areas that would have been difficult for him to get to before. The relationship between the program, Silas, and his mentor continues to develop and is strengthened from this person-centered approach. Silas has been able to work on interview skills and become more job focused.

Recently, Silas has had callbacks from three employment opportunities! Silas and his mentor continue to look forward to seeing what he will achieve in his future relationships and accomplishments.

Bissell Centre: FASS Program

In supporting adults with or suspected to have FASD what has become apparent through the one-to-one work is that the lives of people with FASD are often complex and require staff to work diligently within many systems in order to provide coordinated supports in many facets of their lives. Many adults seek service when they are faced with an ever-increasing mountain of crisis. This includes involvement with the law, food security issues, lack of housing, and mental health and addictions concerns. By meeting the clients where they are at and making small goals that lead to larger successes, staff assists the individuals to move beyond the crisis.

Sam has been a client of the program for a number of years. In working alongside Sam it was essential to focus not only on the health and lifestyle of Sam but on his family unit as a whole, as his home included his partner and their young son. Since accessing the FASS program, Sam and his partner have achieved stability and security. Struggling with drug addiction and homelessness when they entered the service, they have both been able to maintain sobriety, stable housing, secure employment, and schooling for over the past year. From a family centered approach that addresses the social determinants of health, staffs have supported, guided, and provided hand-over-hand assistance that has aided in positive lifestyle changes. Importantly these changes have benefited Sam as an individual, Sam as a husband, and Sam as a father. Getting out of the crisis mentality where crisis was the 'normal' experience has allowed Sam to become excited for the next stages in his family's life where money and employment are not the ever focussed needs. Instead, priority has been switched to family and raising children in healthy environments.

Unlimited Potential: Open Arms Program

This reporting period was a busy one with staff being away on holidays, along with one staff termination from the woman's component, and one staff resigning from the men's. Staffs have been working hard to meet client goals and support them through their challenges and barriers. A success this reporting period has been a program-planning day that has ensured the program goals and outcomes are met. With the understanding that good programs, let alone great ones, don't just happen, staff were able to come together to brainstorm and make careful considerations into why the program exists, what needs to be done, and who does what, when, and where. The strategic planning day invigorated staff and provided motivation to continuously strive to work differently not harder. This was a good way for staff to recognize each other's strengths as well as their own and to spend time getting to know each other on a personal level as well.

We also celebrated and helped to create awareness on FASD Day taking part in the EFAN FASD Day competition. While our program provides mentorship supports to adults with FASD, prevention and awareness coincide with all of our efforts. Purchasing key chains for distribution and printing core prevention messages on each side we took to the streets, our large office building, and talked with the community. As we are housed from a relatively new location on 170 Street we went around our neighborhood and into offices in our building, handing out key chains. This initiative allowed us to meet and greet our neighbors while engaging in FASD prevention conversations with persons not within the social service community. Spreading FASD education has helped create positive connections and has grown our network within the community.

Metis Nation of Alberta: Metis Resource

Working from a strength-based approach that is founded on relationships, consistency, and trust building, the Metis Resource Worker continues to identify and address the unique needs of Metis children and families impacted by FASD.

The role of The Métis Resource has been an essential link between the child, family, community and Human Services. The Métis Resource assists Child and Family Services staff in the development of cultural and concurrent plans to ensure a comprehensive approach to wellness is undertaken. In addition, the Métis Resource has also been critical to ensure Identification and Registration with the Métis Nation for children in care, which provides the foundation to ensure the protection and provision of children to promote their development. The Métis Resource also ensures connection to other care service agencies and social support agencies to ensure our members receive access to appropriate and relevant services in a timely manner. The role has expanded to support our members not involved with children services access education, housing, income assistance, training to employment, financial support, and medical services.

Leduc County: Bridges Program

The Bridges program has provided support to a female participant for the last 2 years, supporting her with stable housing, finances, access to assessment, parenting, as well as helping her to cope with her anxiety and depression. Our Bridges Mentor supported our participant through the assessment process where she was diagnosed with an FASD. Fully expecting a successful AISH application, the client and staff were unpleasantly surprised when the application was denied. Over the last quarter the mentor supported the participant to file an appeal to have her application reviewed. This process included the mentor supporting the participant to get a lawyer through Legal Aid who specialized in AISH and CPP files, as well as meet with the appeal board.

What should be highlighted as successful with this particular client life event was the approach of both the lawyer and staff to work collaboratively together to ensure those responsible for granting a positive appeal truly understood the nature of FASD and its impact on this client.

At the appeal board meeting our participant had so much anxiety that she could not even speak to the panel and sat there shaking and feeling sick. The mentor and the lawyer recognizing that this process made a vulnerable woman even more vulnerable spoke on her behalf, and the mentor was able to provide pertinent information regarding the client experiences, her functioning capacity, and the historical narrative of her life and her challenges. After the appeal panel meeting all parties expected to wait a significant period of time before hearing any results but after a couple of weeks the decision was made to approve AISH for our participant and everything has been completed for her to start receiving a stable income that will have a positive impact on her family long term.

Kids Kottage – Elves: FASD Respite Program

Through the second quarter of the 2016/2017 funding year, the Elves FASD Respite Program (Respite) in partnership with Kids Kottage has experienced several successes. The Program concluded on June 17, 2016 and remained nonoperational for the summer. Staff returned to the program on August 20, 2016 and completed two training sessions prior to the children returning into the program on September 10, 2016.

During staff orientation, we welcomed Katie from Be Free Yoga and Dr. Pei from the University of Alberta to speak to the staff. Staff feedback in conjunction to the sessions was positive. There was also an opportunity for staff to attend MANDT training through the Elves School Program. Six staff members attended and reported a significant understanding in behaviors and the importance of building a rapport with the program participants. On a weekly basis, the Program continues to support professional development, prior to child arrival. This year the focus will be on supporting and promoting play, FASD, and Trauma.

During the previous operational year, there were 12 part-time staff and five on-call staff supporting the program. 13 staff returned for the 2016/2017 year in a part-time or on-call position. Effective September 2016, the Program employs nine part-time staff, 2 full-time staff, and seven on-call staff. Experience and familiarity with the program expectations and routine, is a significant benefit to the program participants. Experienced personnel are better able to ease the transition period and offers stability to the children served.

In the previous narratives, one of our challenges has been supporting the diverse needs of our population with the toys and equipment we have available. Staff input reflected that the program did not have enough toys to support the children's imagination. The staff also shared that there was not enough variety and a limited amount of items to support four classrooms and diverse development levels. Therefore child interest was not sustained as they outgrew or became satiated with toys. Over the summer, Respite received a large donation of toys targeting a wider level of child ages and stages of development, with the intention of positively influencing child engagement. With this donation, our toy inventory has doubled. We have seen the impacts of this donation within the first few weeks of the program.

For example, in one of the classrooms, children were better able to engage in a wider range of dramatic play. They had a grocery store set up on one side of the room and a Veterinary Clinic on the other side. The children and staff stayed actively engaged with the activity for over an hour. The program is actively working on creating diverse play opportunities for the participants every week. Research demonstrates that sustained period of play will improve problem solving, joint attention, inhibitory control and ability to attend to tasks for a longer period.

Our first Family Support Group for the 2016/2017 year took place on September 17th and was beneficial to the families. The Family Support Worker reported that the new groups are forming and there were supportive conversations between new and returning families. Upcoming Family Support Groups will include speakers. Lisa Rogozinsky from EFAN will speak on October 22nd about the supports for FASD that are in Edmonton and Dr. Pei will conduct a Q&A with parents on November 19th. We will conclude the year on December 17th with a special holiday meal for the families and separate activities for the children.

CASA: Fas Tracs Program

CASA has identified the following as program successes this reporting period:

- In August, the program moved from the Fort Road office to the new CASA Centre situated in southwest Edmonton. The new facility features trauma-informed architecture with lots of natural light, wide corridors, and soothing sensory elements like a bubble panel in the reception area. The building also features custom artwork, a fully equipped Snoezelen Room, a gymnasium, and a playground.
- The FASSTRACS program now has access to two Snoezelen Rooms (Fort Road and Centre).
- The Clinical Support Worker attended Snoezelen Training provided by Flaghouse.
- In celebration of FASD Day, the team put on a "mocktail" event for staff at the Fort Road location.
- The Clinical Support Worker presented to Hope Terrace staff on the benefits of Snoezelen.
- Throughout the reporting period, the FASSTRACS team has continued to provide its core services of:
 - o FASD education to both caregivers and teachers
 - o Sensory and Adaptive Skills assessments
 - o In-home and in-school strategies to support families
 - o Safe-space for families to discuss struggles without feeling judged
 - o Quick access to support via telephone—families can contact FASSTRACS staff at any time to problem solve
 - o Snoezelen room sessions and tours

Catholic Social Services: First Steps Program

In reflecting on this reporting period it was interesting to look at the diversity of our clients currently being served through our EFAN Network funding. Of the 19 clients in ORS, 6 have successfully remained engaged with our program for more than 30 months and are in the process of transitioning out of the program. An additional 4 clients have been successfully engaged with their mentors for more than two years.

Measuring the success of clients in the program is often a challenging thing to do, as the changes can be subtle, and by some standards seem insignificant. We have learned how to support our clients in their growth, whatever the level, and to celebrate every accomplishment.

A great example of this is one of our clients who is about to exit the program. To look at her situation some would question what change has occurred. This woman is still actively using substances and her child is living with her grandparents. What people don't see is the two years of intensive work it took to get her successfully set up in independent housing and the fact that she has maintained that housing for a year. The risks faced by this client have been reduced, as she is no longer homeless and subject to the dangers she previously faced on a daily basis.

The client has learned to recognize the impact of her substance use on her child, and works cooperatively with her family to maintain contact with him, while ensuring that he is in a safe and stable home. Of great significance is the fact that this client recognizes that she does not want to stop her substance use for now, and so is taking steps to ensure she does not get pregnant. The client has been in the program for three years without having another pregnancy. The client has attended treatment and knows what it is like to maintain sobriety for a period of time. When she is ready, she says she knows that the supports are there for her.

Glenrose Rehabilitation Hospital: FASD Children's Clinic

During this reporting period there has been a theme of intergenerational/family FASD assessments. We saw one patient whose mother had been assessed through our clinic and we saw two patients that were siblings of individuals who had previously accessed our clinic, and lastly, a twin. This highlights familial FASD and its impact within various family and social structures. This clinic strives to interrupt the intergenerational FASD diagnosis. We hope that resources have changed and that these children will have better access to supports and with education the generational diagnosis can be deterred.

We hope to engage in discussions with the Network stakeholders on this phenomenon that the assessment clinic has noticed in order to identify possible education, training, and resource development opportunities that can be targeted towards families with children previously diagnosed with FASD.

Glenrose Rehabilitation Hospital (GRH): Adult FASD Clinic

- The GRH Adult FASD Assessment Clinic provides comprehensive assessments and management plans to support intervention strategies for adults with suspected FASD within the Edmonton Zone. The clinic service model remains nimble and responsive to the needs of clients and stakeholders.
- The assessment aids clients and their representatives in their efforts to secure needed resources and services. The individual's strengths, challenges, and needs are identified, and strategies, recommendations, and linkages are made as part of the management plan.
- The clinic team serves as a resource and connects formally and informally with their respective disciplines, community partners, researchers, physicians, and other clinic teams.
- Registered Nurse, Melissa Lewanczuk joined the AFASD team on August 15, 2016. She was the successful candidate for a temporary one-year position (Marcy Cwiklewich has taken a temporary leave for an advancement position within the GRH). Melissa has completed her FASD training which included observation and clinical practice with the GRH Adult FASD team; completion of the CanFASD Online course for the Canadian Guidelines; and ongoing mentorship and support from Marcy. Melissa has a Masters in nursing degree with a focus in patient education, and she brings years of experience working in the healthcare field.

Bissell Centre: Hope Terrace

The biggest success this reporting period is evident in the words of the individuals having received a home with Hope Terrace, as highlighted in this Metro News clip:

The three-storey walk-up has a tidy front lawn, a wide front step and a unique mandate. It's home to the first housing program for people with Fetal Alcohol Spectrum Disorder—believed to be the first of its kind in Canada.

Hope Terrace officially opened Friday, though it's been operating since just after Christmas. There's enough room for 24 people, plus the staff who are on site to provide support specific to people diagnosed with FASD.

Cassandra Maslyk, 20, has lived here since April. Sitting in her sunny living room she talks about how she likes to long board and hang out with her friends.

But before moving in she had bigger concerns — she'd been homeless for three years, constantly scrambling to find something to eat and a place to sleep. Now, she has a key to her own place, a roommate, and a community that understands the challenges of FASD.

"It took a couple of months to realize that I can call this my home and it was pretty emotional to me. Just one day I woke up and I was like, this is my house, this is my own," she said.

"It feels amazing."

CASA: First Nations Mental Health and Addictions

Staff recruitment successes:

- Recruiting staff whose life experience and professional qualifications match the needs of this project. Staff recruitment began with a project manager who would be received and heard by the leaders of the First Nations communities. Community leaders understood that they would have an equal role in defining and shaping the services. Members of the First Nations participated in the selection of the provisional psychologist. A joint CASA-First Nations committee will make remaining recruitment decisions.
- The project manager took the time to become familiar with CASA: the people, programs, and approach. This allowed her to both learn about what we have to offer and build her own trust in our partnership. With this established, she was able to say to the communities: *"I stand here with lots of people at CASA behind me."*
- The psychologist became involved with the after-care program in Paul First Nation at the request of the Paul First Nation Director of Health and their mental health team.

Output successes:

- Engaged with people at their own community events (e.g. pow wows, treaty day celebrations, culture camps and various staff engagement strategies).
- Met first with people with whom some connection/relationship already existed
- Engaged with elders.
- Identified possible change agents / trail blazers, and consulted with them about possible barriers and success factors.
- Followed the direction of the communities' leadership.

In parallel, we:

- Began looking for differences and commonalities between the communities;
- Started to think about and discuss with the First Nations what culturally-relevant programming might look like;
- Started the conversation about FASD and the mental health of children and their families; and
- Began conversations with other service stakeholders about common goals and collaboration.

Strategies

Strategy #1: Elizabeth Fry Society, Girls Empowered and Strong Program (1.0 FTE)		A/D	
		Supports	X
		PCAP	
		Network Op	
System and Client Outcomes:	<p>The Network will provide timely and coordinated supports and services based on an integrated lifespan approach which will result in:</p> <ul style="list-style-type: none"> • Individuals suspected or with an FASD experience improvement in their wellbeing. • Caregivers of individuals with an FASD experience improvement in their wellbeing. • Individuals and caregivers receiving support report satisfaction with the services received. 		
FASD Goal:	<p>Albertans with an FASD and their caregivers receive coordinated access to the supports and services they need, when they need it.</p>		
Strategy Description	<p>The Girls Empowered and Strong program is a support for teenage girls impacted by an FASD who want to address the many issues facing them and become empowered to make strong and positive choices for their futures.</p> <p>The goal of this program is to provide teen girls, ages 13 to 17, with the skills and knowledge they need in order to make healthy life choices, thereby preventing future involvement in the criminal legal system. The program will address the realities that teen girls face in their daily lives.</p> <p>Workshops are available that address topics such as healthy relationships, addictions, peer pressure, healthy sexuality, bullying, dating violence, shoplifting, and other important issues. Each session includes creative activities to aid teen girls to understand the emotions they are facing as they journey into adulthood.</p>		
Related Pillar	<p>Supports for Individuals and Caregivers</p>		
Key Activities	<ul style="list-style-type: none"> • Provide weekly support group workshops to program participants in a school based setting. • Provide an after-school drop in program once a week. • Provide one-to-one mentorship support to program participants. • Provide referrals to community agencies and resources. • Collect data according to requirements of ORS, FASD Service Network Program and the Network. • Actively participate on the Edmonton and area Fetal Alcohol Network Society and Supports and Services Team. 		
Responsible Parties	<p>The Elizabeth Fry Society of Edmonton is contracted to provide the support services in partnership with the Network.</p>		
Status	Enhancement	Sustaining a program that existed prior to Network funding.	
Number of clients to be served	Baseline/year:	40	
	Actual:	45	
Budget Allocation	\$37,312.00		
6 Month Expenditure	\$18,656.00		

Strategy #2: Catholic Social Services, McDaniel Youth Program (4.0 FTE)		A/D	
		Supports	X
		PCAP	
		Network Op	
System and Client Outcomes:	<p>The Network will provide timely and coordinated supports and services based on an integrated lifespan approach which will result in:</p> <ul style="list-style-type: none"> • Individuals suspected or with an FASD experience improvement in their wellbeing. • Caregivers of individuals with an FASD experience improvement in their wellbeing. • Individuals and caregivers receiving support report satisfaction with the services received. 		
FASD Goal:	Albertans with an FASD and their caregivers receive coordinated access to the supports and services they need, when they need it.		
Strategy Description	Provides one-to-one mentorship supports to youth aged 14 to 19 years who have an FASD to help them access community supports and make a successful transition into adulthood. Mentors work with youth for a period of up to 3 years.		
Related Pillar	Supports for Individuals and Caregivers		
Key Activities	<ul style="list-style-type: none"> • Connect program participants to and advocate for access to community resources. • Provide one-to-one mentorship to ensure basic needs of program participants are met. • Provide social and recreational opportunities to promote healthy social interactions. • Advocate for and find suitable housing and employment options for program participants. • Collect data according to requirements of ORS, FASD Service Network Program and the Network. • Actively participate on the Edmonton and area Fetal Alcohol Network Society and Supports and Services Team. 		
Responsible Parties	Catholic Social Services is contracted to provide the support services in partnership with the Network.		
Status	New Program	Sustaining a new program/service.	
Number of clients to be served	Baseline/year:	60	
	Actual:	58	
Budget Allocation	\$502,759.00		
6 Month Expenditure	\$251,379.50		

Strategy #3: Bissell Centre, Fetal Alcohol Spectrum of Services (1.0 FTE)		A/D	
		Supports	X
		PCAP	
		Network Op	
System and Client Outcomes:	<p>The Network will provide timely and coordinated supports and services based on an integrated lifespan approach which will result in:</p> <ul style="list-style-type: none"> • Individuals suspected or with an FASD experience improvement in their wellbeing. • Caregivers of individuals with an FASD experience improvement in their wellbeing. • Individuals and caregivers receiving support report satisfaction with the services received. 		
FASD Goal:	Albertans with an FASD and their caregivers receive coordinated access to the supports and services they need, when they need it.		
Strategy Description	The Adult Advocate provides one-on-one long-term support to adults who are affected by FASD. One-to-one mentorship supports adults to access community supports and address secondary disabilities associated with FASD, such as employment and housing issues. The mentor works with program participants for a period of up to 5 years.		
Related Pillar	Supports for Individuals and Caregivers		
Key Activities	<ul style="list-style-type: none"> • Connect program participants to and advocate for access to community resources. • Provide one-to-one mentorship to ensure basic needs of program participants are met. • Case consults with involved PCAP program to develop family plan. • Advocate for and find suitable housing and employment options for program participants. • Collect data according to requirements of ORS, FASD Service Network Program and the Network. • Actively participate on the Edmonton and area Fetal Alcohol Network Society and Supports and Services Team. 		
Responsible Parties	Bissell Centre is contracted to provide the support services in partnership with the Network.		
Status	Enhancement	Sustaining a program that existed prior to Network funding.	
Number of clients to be served	Baseline/year	12	
	Actual:	12	
Budget Allocation	\$60,765.00		
6 Month Expenditure	\$30,382.00		

Strategy #4: Unlimited Potential, Open Arms Program (3.7 FTE)		A/D	
		Supports	X
		PCAP	
		Network Op	
System and Client Outcomes:	<p>The Network will provide timely and coordinated supports and services based on an integrated lifespan approach which will result in:</p> <ul style="list-style-type: none"> • Individuals suspected or with an FASD experience improvement in their wellbeing. • Caregivers of individuals with an FASD experience improvement in their wellbeing. • Individuals and caregivers receiving support report satisfaction with the services received. 		
FASD Goal:	Albertans with an FASD and their caregivers receive coordinated access to the supports and services they need, when they need it.		
Strategy Description	Open Arms mentors provide specific and culturally sensitive support to women who have a Fetal Alcohol Spectrum Disorder (FASD) and may or may not be parenting children. The program is designed to deal with the everyday problems and system barriers that individuals with an FASD face and provides hands on assistance to access services and supports.		
Related Pillar	Supports for Individuals and Caregivers		
Key Activities	<ul style="list-style-type: none"> • Connect program participants to and advocate for access to community resources. • Provide one-to-one mentorship to ensure basic needs of program participants are met. • Advocate for and find suitable housing and employment options for program participants. • Collect data according to requirements of ORS, FASD Service Network Program and the Network. • Actively participate on the Edmonton and area Fetal Alcohol Network Society and Supports and Services Team. 		
Responsible Parties	Unlimited Potential is contracted to provide the support services in partnership with the Network.		
Status	New Program	Sustaining a program that did not exist prior to Network funding.	
Number of clients to be served	Baseline/year	45	
	Actual:	45	
Budget Allocation	\$325,146.00		
6 Month Expenditure	\$162,573.00		

Strategy #5: Metis Nation of Alberta, FASD Resource Worker (1.0 FTE)		A/D	
		Supports	X
		PCAP	
		Network Op	
System and Client Outcomes:	<p>The Network will provide timely and coordinated supports and services based on an integrated lifespan approach which will result in:</p> <ul style="list-style-type: none"> • Individuals suspected or with an FASD experience improvement in their wellbeing. • Caregivers of individuals with an FASD experience improvement in their wellbeing. • Individuals and caregivers receiving support report satisfaction with the services received. 		
FASD Goal:	Albertans with an FASD and their caregivers receive coordinated access to the supports and services they need, when they need it.		
Strategy Description	The Mentorship Program supports and encourages the healthy development of children and families impacted by an FASD through culturally sensitive one-to-one mentorship supports.		
Related Pillar	Supports for Individuals and Caregivers		
Key Activities	<ul style="list-style-type: none"> • Connect program participants to and advocate for access to community resources. • Provide one-to-one culturally sensitive support to children and their support networks to ensure basic needs of program participants are met. • Assist CFSA workers to develop cultural and concurrent plans for program participants and ensure the issues associated with an FASD are taken into consideration. • Advocate for and provide referrals to an FASD assessments and diagnostic services. • Collect data according to requirements of ORS, FASD Service Network Program and the Network. • Actively participate on the Edmonton and area Fetal Alcohol Network Society and Supports and Services Team. 		
Responsible Parties	Metis Nation of Alberta is contracted to provide the support services in partnership with the Network.		
Status	Enhancement	Sustaining a program that existed prior to Network funding.	
Number of clients to be served	Baseline/year:	20	
	Actual:	20	
Budget Allocation	\$62,897.00		
6 Month Expenditure	\$31,449.00		

Strategy #6: Leduc County, Bridges Program (2.3 FTE)		A/D	
		Supports	X
		PCAP	
		Network Op	
System and Client Outcomes:	<p>The Network will provide timely and coordinated supports and services based on an integrated lifespan approach which will result in:</p> <ul style="list-style-type: none"> • Individuals suspected or with an FASD experience improvement in their wellbeing. • Caregivers of individuals with an FASD experience improvement in their wellbeing. • Individuals and caregivers receiving support report satisfaction with the services received. 		
FASD Goal:	Albertans with an FASD and their caregivers receive coordinated access to the supports and services they need, when they need it.		
Strategy Description	<p>Bridges FASD Mentor program is a support program for women and men (18 years or older) who have either strong indicators, or a diagnosis of a Fetal Alcohol Spectrum Disorder. It provides support for three years to help stabilize the lives of affected persons and their children and aims to teach and model appropriate daily life management and skills. The program is designed to stabilize the clients' lives, reduce the number and severity of the secondary disabilities that often accompany an FASD and to work with community partners and regional community resources to develop and implement services. Clients may stay involved with Bridges for three full years.</p>		
Related Pillar	Supports for Individuals and Caregivers		
Key Activities	<ul style="list-style-type: none"> • Connect program participants to and advocate for access to community resources including but not limited to AISH, housing stable income. • Provide one-to-one support to ensure basic needs of program participants are met. • Assist program participants to address addictions and parenting issues. • Collect data according to requirements of ORS, FASD Service Network Program and the Network. • Actively participate on the Edmonton and area Fetal Alcohol Network Society and Supports and Services Team. 		
Responsible Parties	Leduc County is contracted to provide the support services in partnership with the Network.		
Status	New Program	Sustaining a program that did not exist prior to Network funding.	
Number of clients to be served	Baseline/year:	25	
	Actual	27	
Budget Allocation	\$219,607.00		
6 Month Expenditure	\$129,187.00		

Strategy #7: Kids Kottage/Elves Special Needs Society, FASD Respite Program		A/D	
		Supports	X
		PCAP	
		Network Op	
System and Client Outcomes:	<p>The Network will provide timely and coordinated supports and services based on an integrated lifespan approach which will result in:</p> <ul style="list-style-type: none"> • Individuals suspected or with an FASD experience improvement in their wellbeing. • Caregivers of individuals with an FASD experience improvement in their wellbeing. • Individuals and caregivers receiving support report satisfaction with the services received. 		
FASD Goal:	Albertans with an FASD and their caregivers receive coordinated access to the supports and services they need, when they need it.		
Strategy Description	<p>Elves Special Needs Society and the Kids Kottage Foundation have formed a cooperative association to provide an FASD Respite Care Program to support families with children affected with an FASD. Offering a variety of educational and recreational activities, children are cared for in a safe, supported and structured environment. Activities include:</p> <ul style="list-style-type: none"> • Arts/crafts, gym/sensory activities, computer time, games, free play, swimming, snack time <p>The program will provide site-based respite for families with children between the ages of three and eight years old, and will run from September to June. There is a maximum of six hours of respite per week for each child, and a maximum of 20 participants in attendance per session.</p>		
Related Pillar	Supports for Individuals and Caregivers		
Key Activities	<ul style="list-style-type: none"> • Advocate for and provide referrals to diagnostic and assessment clinics. • Provide parenting skills and development enhancement through Stepping Stones Triple P programs and parent support group workshops. • Provide a structured environment and consistent routines to program participants that encourage the learning of coping strategies and social skills. • Collect data according to requirements of ORS, FASD Service Network Program and the Network. • Actively participate on the Edmonton and area Fetal Alcohol Network Society and Supports and Services Team. 		
Responsible Parties	Kids Kottage in partnership with Elves Special Needs Society is contracted to provide the support services in partnership with the Network.		
Status	Enhancement	Sustaining a program that existed prior to Network funding.	
Number of clients to be served	Baseline/year:	33	
	Actual:	33	
Budget Allocation	\$111,936.00		
6 Month Expenditure	\$55,968.00		

Strategy #8: CASA, FAS TRACS		A/D	
		Supports	X
		PCAP	
		Network Op	
System and Client Outcomes:	<p>The Network will provide timely and coordinated supports and services based on an integrated lifespan approach which will result in:</p> <ul style="list-style-type: none"> • Individuals suspected or with an FASD experience improvement in their wellbeing. • Caregivers of individuals with an FASD experience improvement in their wellbeing. • Individuals and caregivers receiving support report satisfaction with the services received. 		
FASD Goal:	Albertans with an FASD and their caregivers receive coordinated access to the supports and services they need, when they need it.		
Strategy Description	The FAS TRACS program provides short-term mental health services for children (aged 3 – 18 years) who have a diagnosis of (or query of) FASD along with emotional, psychological and/or behavioral problems. This group program is designed to promote mental well-being and to enhance functioning through the development and implementation of practical strategies that can be adapted to the home, school and/or community settings.		
Related Pillar	Supports for Individuals and Caregivers		
Key Activities	<ul style="list-style-type: none"> • Prepare sensory profiles on children impacted by an FASD. • Educate the caregivers and children impacted by an FASD of sensory needs. • Recommend strategies and activities for optimal functioning and support the implementation of strategies within the home. • Collect data according to requirements of ORS, FASD Service Network Program and the Network. • Actively participate on the Edmonton and area Fetal Alcohol Network Society and Supports and Services Team. 		
Responsible Parties	CASA is contracted to provide the support services in partnership with the Network.		
Status	New Program	Sustaining a new program that did not exist prior to Network funding.	
Number of clients to be served	Baseline/year:	20	
	Actual:	12	
Budget Allocation	\$51,801.00		
6 Month Expenditure	\$24,756.00		

Strategy #9: Catholic Social Services, First Steps Program (2.4 FTE)		A/D	
		Supports	
		PCAP	X
		Network Op	
System and Client Outcomes:	<p>Prevention initiatives are developed and delivered using a collaborative and cooperative approach that result in the following system and client outcomes:</p> <ul style="list-style-type: none"> • PCAP program are available across Alberta and meet the community needs. • Participants know that FASD is caused by alcohol use during pregnancy. • Participants develop the intention to eliminate alcohol use during current and future pregnancies. • Secondary disabilities experienced by individuals with an FASD are reduced. • Subsequent births of children with prenatal exposure to alcohol by women who have used substances while pregnant are reduced. • Program participants experience improvement in their wellbeing. • Children of program participants experience improvement in their wellbeing. • Program participants report satisfaction with the program and complete the three-year term. 		
FASD Goal Rational	Albertans are aware that alcohol use during pregnancy can lead to an FASD, that an FASD can be prevented and that FASD prevention is a shared responsibility.		
Strategy Description	The First Steps Program offers mentorship to women who are at high risk of giving birth to a child with an FASD (Fetal Alcohol Spectrum Disorder). This includes women who are pregnant or who have recently given birth and have used drugs or alcohol during the pregnancy. Mentors work with women for 3 years.		
Related Pillar	Prevention (Level 3 and Level 4)		
Key Activities	<ul style="list-style-type: none"> • Provide one-to-one support to ensure basic needs of program participants are met. • Through mentorship address addictions issues. • Connect program participants to and advocate for access to community resources. • Collect data according to requirements of ORS, FASD Service Network Program and the Network. • Actively participate on the Edmonton and area Fetal Alcohol Network Society and Supports and Services Team. 		
Responsible Parties	Catholic Social Services is contracted to provide the support services in partnership with the Network.		
Status	Enhancement	Sustaining a program that existed prior to Network funding.	
Number of clients to be served	Baseline/year:	29	
	Actual:	25	
Budget Allocation	\$202,389.00		
6 Month Expenditure	\$101,196.00		

Strategy #10: Glenrose Rehabilitation Hospital, Children's FASD Clinic		A/D	X
		Supports	
		PCAP	
		Network Op	
System and Client Outcomes:	Albertans have access to timely and affordable multidisciplinary assessment and diagnostic services across the lifespan that result in clients and/or caregivers having an increased understanding of how FASD affects them, the supports and services available to them in the community and are referred to post assessment supports that meet their needs.		
FASD Goal:	Albertans who may be affected by an FASD have access to timely and affordable assessments resulting in recommendations for interventions based on their needs and strengths.		
Strategy Description	FASD Clinical Services through the Glenrose Rehabilitation Hospital will provide additional assessments to children suspected of having an FASD and who are under the age of 18.		
Related Pillar	Assessment and Diagnosis		
Key Activities	<ul style="list-style-type: none"> • Complete multidisciplinary assessment and diagnostic services for children and families. • Provide results and recommendations to families. • Link families with community partners who provide interventions and support services. • Act as a resource to the community and families regarding FASD. • Collect data according to requirements of ORS, FASD Service Network Program and the Network. • Actively participate on the Edmonton and area Fetal Alcohol Network Society and Supports and Services Team. 		
Responsible Parties	Alberta Health Services through the Glenrose Rehabilitation Hospital is contracted to provide the assessment services in partnership with the Network.		
Status	Enhancement	Sustaining a program that existed prior to Network funding.	
Number of clients to be served	Baseline/year:	12	
	Actual:	6	
Budget Allocation	\$87,417.00		
6 Month Expenditure	\$43,709.00		

Strategy #11: Unlimited Potential, Open Arms Program (2.0 FTE) PDSI Grant		A/D	
		Supports	X
		PCAP	
		Network Op	
System and Client Outcomes:	<p>The Network will provide timely and coordinated supports and services based on an integrated lifespan approach which will result in:</p> <ul style="list-style-type: none"> • Individuals suspected or with an FASD experience improvement in their wellbeing. • Caregivers of individuals with an FASD experience improvement in their wellbeing. • Individuals and caregivers receiving support report satisfaction with the services received. 		
FASD Goal:	Albertans with an FASD and their caregivers receive coordinated access to the supports and services they need, when they need it.		
Strategy Description	Open Arms mentors provide specific and culturally sensitive support to men who have a Fetal Alcohol Spectrum Disorder (FASD) and may or may not be parenting children. The program is designed to deal with the everyday problems and system barriers real that individuals with an FASD face and provides hands on assistance to access services and supports.		
Related Pillar	Supports for Individuals and Caregivers		
Key Activities	<ul style="list-style-type: none"> • Connect program participants to and advocate for access to community resources. • Provide one-to-one mentorship to ensure basic needs of program participants are met. • Advocate for and find suitable housing and employment options for program participants. • Collect data according to requirements of ORS, FASD Service Network Program and the Network. • Actively participate on the Edmonton and area Fetal Alcohol Network Society and Supports and Services Team. 		
Responsible Parties	Unlimited Potential is contracted to provide the support services in partnership with the Network.		
Status	New Program	Sustaining a program that did not exist prior to Network funding.	
Number of clients to be served	Baseline/year	24	
	Actual:	24	
Budget Allocation	\$229, 755.69		
6 Month Expenditure	\$114,878.00		

Strategy #12: Glenrose Rehabilitation Hospital, Children's FASD Clinic Health Grant		A/D	X
		Supports	
		PCAP	
		Network Op	
System and Client Outcomes:	Albertans have access to timely and affordable multidisciplinary assessment and diagnostic services across the lifespan that result in clients and/or caregivers having an increased understanding of how FASD affects them, the supports and services available to them in the community and are referred to post assessment supports that meet their needs.		
FASD Goal:	Albertans who may be affected by an FASD have access to timely and affordable assessments resulting in recommendations for interventions based on their needs and strengths.		
Strategy Description	FASD Clinical Services through the Glenrose Rehabilitation Hospital will provide additional assessments to children suspected of having an FASD and who are under the age of 18.		
Related Pillar	Assessment and Diagnosis		
Key Activities	<ul style="list-style-type: none"> • Complete multidisciplinary assessment and diagnostic services for children and families. • Provide results and recommendations to families. • Link families with community partners who provide interventions and support services. • Act as a resource to the community and families regarding FASD. • Collect data according to requirements of ORS, FASD Service Network Program and the Network. • Actively participate on the Edmonton and area Fetal Alcohol Network Society and Supports and Services Team. 		
Responsible Parties	Alberta Health Services through the Glenrose Rehabilitation Hospital is contracted to provide the assessment services in partnership with the Network.		
Status	Enhancement	Sustaining a program that existed prior to Network funding.	
Number of clients to be served	Baseline/year:	10	
	Actual:	5	
Budget Allocation	\$50,000.00		
6 Month Expenditure	\$25,000.00		

Strategy #13: Glenrose Rehabilitation Hospital, Adults FASD Clinic Health Grant		A/D	X
		Supports	
		PCAP	
		Network Op	
System and Client Outcomes: Business Priority	Albertans have access to timely and affordable multidisciplinary assessment and diagnostic services across the lifespan that result in clients and/or caregivers having an increased understanding of how FASD affects them, the supports and services available to them in the community and are referred to post assessment supports that meet their needs.		
FASD Goal: Rationale	Albertans who may be affected by an FASD have access to timely and affordable assessments resulting in recommendations for interventions based on their needs and strengths.		
Strategy Description	FASD Clinical Services through the Glenrose Rehabilitation Hospital will provide additional assessments to adults suspected of having an FASD.		
Related Pillar	Assessment and Diagnosis		
Key Activities	<ul style="list-style-type: none"> • Complete multidisciplinary assessment and diagnostic services for adults. • Provide results and recommendations to individuals. • Link individuals with community partners who provide interventions and support services. • Act as a resource to the community regarding FASD. • Collect data according to requirements of ORS, FASD Service Network Program and the Network. • Actively participate on the Edmonton and area Fetal Alcohol Network Society and Supports and Services Team. 		
Responsible Parties	Alberta Health Services through the Glenrose Rehabilitation Hospital is contracted to provide the assessment services in partnership with the Network.		
Status	Enhancement	Sustaining a program that existed prior to Network funding.	
Number of clients to be served	Baseline/year:	45	
	Actual:	20	
Budget Allocation	\$390,000.00		
6 Month Expenditure	\$133,381.00		

Strategy #16: Bissell Centre, Hope Terrace Housing Project		A/D	
		Supports	X
		PCAP	
		Network Op	
System and Client Outcomes:	<ul style="list-style-type: none"> • Improved community understanding of the unique needs of clients with FASD. • Reduced risk of homelessness for Albertans with FASD. • Removed barriers to improve equity in access to housing supports. 		
FASD Goal:	Albertans will benefit from improved access to services with proven effectiveness and further integrated supports that promote equitable participation in their community.		
Strategy Description	The staffing provide support to adults who are affected by FASD and living in the Hope Terrace Building. One-to-one mentorship and group supports facilitate adults to access community supports and address secondary disabilities associated with FASD.		
Related Pillar	Supports for Individuals and Caregivers		
Key Activities	<ul style="list-style-type: none"> • Personal Support work to support home stability, life skills and goal achievement through a client centered approach and wrap around services • Cultural Coordinator to support cultural integration and education by providing healing circles, one on one mentoring and to provide more culturally appropriate services. • Addiction and Mental Health Support staff would assist with assessing a resident's need for supports to maintain ongoing mental health, identify vulnerabilities and resource subsequent safeguards to assist participants with decision making. 		
Responsible Parties	Bissell Centre is contracted to provide the support services in partnership with the Network.		
Status	Enhancement	Sustaining a program that existed prior to Network funding.	
Number of clients to be served	Baseline/year	0	
	Actual:	29	
Budget Allocation	\$363,000.00 (15-month funding cycle)		
6 Month Expenditure	\$217,800 (9-month expenditures)		

Strategy #17: CASA, First Nations Mental Health and Addictions Program		A/D	
		Supports	X
		PCAP	
		Network Op	
System and Client Outcomes:	<p>The Network will provide timely and coordinated supports and services based on an integrated lifespan approach which will result in:</p> <ul style="list-style-type: none"> • Improve the mental health of children and youth with FASD and their families • Decrease the incidence of addictions in children and youth with FASD and their families • Improve child, youth, and family wellness and connectedness • People are able to meet their basic daily needs and participate in community • Community members are engaged in the planning and implementation of FASD mental health supports and services • Services reflect the physical, emotional, psychological and spiritual values and needs of the community <p>Access to FASD mental health services is improved in First Nation communities</p>		
FASD Goal:	To increase capacity in the area of mental health in aboriginal communities for children and youth with FASD.		
Strategy Description	CASA Child, Adolescent and Family Mental Health was funded to partner with a First Nations Community in the Edmonton area for the purposes of providing mental health services for children and families, in particular those affected by FASD. The residents of the First Nation community will benefit from improved access to mental health services, and improved integration of those services into related community-based supports and services. Community members will define the needs and preferred service outcomes, and services will be delivered in a manner that is client-centered, collaborative, community-based, and community-driven.		
Related Pillar	Supports for Individuals and Caregivers		
Key Activities	<ul style="list-style-type: none"> • Education and Training – provide information related to children’s mental health and clinical skills • Mentoring and Coaching – supports intentional skill development in the workplace facilitated by the relationship between the mentor/coach and learners. • Consultation – provides advice/input or an alternate perspective at the request of a practitioner. Activities include case conferences or consultations with or without clients and families present • Direct mental health care service – for children and youth with FASD and their families, living in aboriginal communities that lack mental health services that meet their needs 		
Responsible Parties	CASA is contracted to provide the support services in partnership with the Network.		
Status	New Program	Sustaining a new program that did not exist prior to Network funding.	
Number of clients to be served	Baseline/year:	0	
	Actual:	0	
Budget Allocation	\$420,000 (15-month funding)		
6 Month Expenditure	\$252,000 (9-month expenditures)		

Operational Strategies

Strategy #14: Network Coordinator, Network Banker and Network Contract Manager positions		A/D	
		Supports	
		PCAP	
		Network Op	X
System and Client Outcomes:	The Network will plan FASD programs and services based on a collaborative approach with mechanisms in place to facilitate stakeholder engagement and information sharing. Access to training, resources and evaluation results will inform Network activities, supports and services and strategic planning.		
FASD Goal:	Stakeholders collaborate to develop and mobilize knowledge to continuously transform Alberta's FASD system to achieve outcomes and goals.		
Strategy Description	<p>To ensure compliance with the FASD Service Network Program Guidelines and to meet all reporting requirements the Network will hire (via an agency) and contract the following support staff positions:</p> <ul style="list-style-type: none"> Network Coordinator (Catholic Social Services) Network Contract Manager (Contracted position) Network Banker (Bissell Centre) 		
Related Pillar	Organizational Learning		
Key Activities	<ul style="list-style-type: none"> Coordinate Network operations and fulfill Service Network Program requirements. Participate on Committees and Councils at the provincial, regional and local levels. Plan and host monthly Network meetings. Develop and revise Network community documents: SWOT, Needs Assessment and Environmental Scan. Develop and moderate all social media Network sites. Disseminate training and education materials to the community. Coordinate Network service management and service quality and compliance review. Monitor program expenditures and fiscal responsibility 		
Responsible Parties	<ul style="list-style-type: none"> Catholic Social Services is contracted to house the Network Coordinator position. The Network contracts Bissell Centre to provide Network banking services. The Network contracts an independent consultant to provide contract management services. 		
Budget Allocation	Coor: \$108,109.66 Banker: \$59,699.00 Contract: \$5,331.00		
6 Month Expenditure	Coor: \$104,000.00 Banker: \$29,849.50 Contract: \$2,665.50		

Strategy #15: Network Development		A/D	
		Supports	
		PCAP	
		Network Op	X
System and Client Outcomes:	The Network will plan FASD programs and services based on a collaborative approach with mechanisms in place to facilitate stakeholder engagement and information sharing. Access to training, resources and evaluation results will inform Network activities, supports and services and strategic planning.		
FASD Goal:	Stakeholders collaborate to develop and mobilize knowledge to continuously transform Alberta's FASD system to achieve outcomes and goals.		
Strategy Description	<p>In order to ensure the Network and its operations continue to function at an optimal level, which includes governance, membership, communication and leadership, the Network has prioritized building on the infrastructure of the Network with standardizing its policies and procedures in conjunction with the bylaws, amending and enhancing the communication and reporting strategies (both internal and external) and developing a strategic plan. To ensure compliance with the FASD Service Network Program Guidelines and to meet all reporting requirements the Network aims to:</p> <ul style="list-style-type: none"> • Enhance the policies and procedures to align with bylaws. • Amend and enact the Network Communication Plan. • Develop a review process for the Network Banker, Network Contract Manager, and Network Coordinator as it relates to their roles and responsibilities. 		
Related Pillar	Organizational Learning		
Key Activities	<ul style="list-style-type: none"> • Contract a consultant to review current policies and procedures to assess effectiveness and alignment with bylaws. • Review, amend, and support Communication Plan (includes enhancing current internet sites). • Develop and implement file management systems. • Establish process or mechanism for reviewing and meeting the requirements of incorporated society status with corporate registries. • Develop, implement, and evaluate Network strategic plan and priorities. 		
Responsible Parties	<ul style="list-style-type: none"> • The Network membership 		
Budget Allocation	\$10,000.00		
6 Month Expenditure	\$5,000.00		

For more information or clarification please contact Lisa Rogozinsky at Lisa.Rogozinsky@cssalberta.ca

These young social workers know
NOTHING, I used to see 500
clients EVERY day...

ONLY 500, I'd have
been out on my ear
for SLACKING...

I had to see a THOUSAND
clients in 12 MINUTES and
half of them were DEAD!

You were LUCKY!

